Name: Liban Abdi Ali #198712

Address: 400 Faunce Corner Road North Dartmouth, MA, 02747

I object the proposed settlement and would like to be present at the <u>Fairness Hearing</u> on May 03, 2021

Reason: On Thursday, May 07,2020, Judge Young issued an order known as a Preliminary Injunction, followed by an opinon on May 12, 2020 further explaining his order. In a powerful order and opinion, The Court ruled strongly in favor of the immigrants detained at Bristol County. The Court ruled that the government likely has acted unconstitutionally and shown deliberate indifference to the substantial risk of serious harm posed by Covid-19 to the immigrants detained at Bristol County in their care. The Court was correct in their ruling. Even after the preliminary injunction was ordered Bristol County House Of Correction failed to keep us safe. In Feb 08, 2021, I Liban Abdi Ali got Covid-19. After myslef and two other detaines receiving a positive Covid test results, Bristol County faild to follow the CDC guideline. Instead of isolating us from the rest of the detaines, they quarantined the entire unit. Which resulted in us spreading Covid to the rest of the detaines who where tested negative.

Proposal: If the court finds my reason for objection to be valid, I would like to propose the option of 24hr home confinement. I would like to spend the time while I'm fighting my case with my family. I have served my sentance on the case DHS wants to deport me on. I am not a flight risk due to the fact that my entire family is in the USA and are citizens, my wife, my daughter, and my siblings are born citizens. I am not a danger to the community, due to the fact that I have served my sentance and believe that I am rehabilitated. During my sentance I have received four Certificates and my High School Equivalence. I also ernd over a year of good time and was relesed on mandetory parole.

Pila ali Date 4-18-21

CPS CORRECTIONAL HEALTHCARE

MEDICAL RESULTS NOTICE

(Not for Sensitive Protected Health Information)

NAME: Ali, Liban Abdi CIN NUMBER: 198712 DATE:	E FEB 0 8 2021	TIME:/050
The following test(s) were completed:		
Urine Blood	NormalNormalNormal	AbnormalAbnormalAbnormal
 Stool	Normal Normal	• Abnormal
		· · · · · · · · · · · · · · · · · · ·
If your test results were within the normal range, no additional treatment is needed at this time. You will be seen as scheduled for chronic care clinics and periodic health assessments. If you have medical issues or concerns, please request medical assistance through the sick call process.		
If the test results were abnormal, you will be s provider and/or for follow up testing, if needed as soon as we are able.	cheduled for an appo d. Please be patient.	ointment with a medical You will be scheduled
Reviewed by Provider:	adrio FMP-BC	FEB 0 8 2021 10 50
Date Sent to Patient and Copied to Chart:		
Staff Member Sending Notification:	35	



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